

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 141A

Registered No. 32

1. PLACE OF BIRTH

County Gila State ARIZONA

District or Township _____ or Village _____

City MIAMI, AZ No. Main Inspiration Hospital St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Francis Ray Rooney } If child is not yet named, make supplemental report, as directed.

3. Sex of Child male To be answered ONLY in event of plural births. } 4. Twin, triplet or other. 2 6. Legitimate? yes 7. Date of birth April 25 1931
Month Day Year

8. FATHER
Full name Vernon Lonnie Rooney

9. Residence (Usual place of abode) MIAMI, ARIZONA
If non-resident, give place and state.

10. Color or race white 11. Age at last birthday 32 (Years)

12. Birthplace (city or place) Ft. Worth
(State or country) Texas

13. Occupation Timekeeper
Nature of Industry Copper & mine

20. Number of children of this mother. } (Taken as of time of birth of child herein certified and including this child.)

14. MOTHER
Full maiden name Jessie Wagon Fisher

15. Residence (Usual place of abode) MIAMI, ARIZONA
If non-resident, give place and state.

16. Color or race white 17. Age at last birthday 31 (Years)

18. Birthplace (city or place) _____
(State or country) Oklahoma

19. Occupation Housewife
Nature of Industry

(a) Born alive and now living. 3
(b) Born alive but now dead. 1
(c) Stillborn. 0

21. Were precautions taken against ophthalmia neonatorum? yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE
I hereby certify that I attended the birth of this child, who was alive at 3:10 A m. on the date above stated.
(Born alive or stillborn)

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.
Signature J. J. Trumble
R. F. MILLER, M.D.
(Physician or midwife.)

Given name added from a supplemental report. _____ Address MIAMI, ARIZONA
Month, day, year _____ Filed Apr 30 1931 Registrar L. E. Jones

698-425-169

each in order of birth stated.